

ISSUE SLIP STAPLE AREA (for additional cross references)

09/09380

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | TAG      |        | 7/24/01  |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | K.S.     | H/L    | 08/20/01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date | Claim          | Date | Claim          | Date |
|----------------|------|----------------|------|----------------|------|
| Final Original |      | Final Original |      | Final Original |      |
| 1              |      | 51             |      | 101            |      |
| 2              |      | 52             |      | 102            |      |
| 3              |      | 53             |      | 103            |      |
| 4              |      | 54             |      | 104            |      |
| 5              |      | 55             |      | 105            |      |
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| 7              |      | 57             |      | 107            |      |
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| 11             |      | 61             |      | 111            |      |
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| 13             |      | 63             |      | 113            |      |
| 14             |      | 64             |      | 114            |      |
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| 16             |      | 66             |      | 116            |      |
| 17             |      | 67             |      | 117            |      |
| 18             |      | 68             |      | 118            |      |
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| 24             |      | 74             |      | 124            |      |
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| 26             |      | 76             |      | 126            |      |
| 27             |      | 77             |      | 127            |      |
| 28             |      | 78             |      | 128            |      |
| 29             |      | 79             |      | 129            |      |
| 30             |      | 80             |      | 130            |      |
| 31             |      | 81             |      | 131            |      |
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| 33             |      | 83             |      | 133            |      |
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| 41             |      | 91             |      | 141            |      |
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| 44             |      | 94             |      | 144            |      |
| 45             |      | 95             |      | 145            |      |
| 46             |      | 96             |      | 146            |      |
| 47             |      | 97             |      | 147            |      |
| 48             |      | 98             |      | 148            |      |
| 49             |      | 99             |      | 149            |      |
| 50             |      | 100            |      | 150            |      |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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